



City of Windcrest  
8601 Midcrown  
Windcrest, TX 78239  
(210)655-0022, Fax (210)655-8776

## MECHANICAL PERMIT APPLICATION

DATE: \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

JOB ADDRESS:		
OWNER:	ADDRESS:	PHONE:
CONTRACTOR:	ADDRESS:	PHONE:
VALUATION OF WORK:	PERMIT FEE:	

CLASS OF WORK: NEW  ADDITION  ALTERATION  REPAIR

DESCRIBE WORK:

### NOTICE

**THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED IN NINETY (90) DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF SIXTY (60) DAYS AT ANY TIME AFTER WORK IS COMMENCED.**

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

\_\_\_\_\_  
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER (IF BUILDER)

\_\_\_\_\_  
DATE

CITY OFFICIAL COMMENTS:

APPROVED BY:

DATE: